

SEP. 28. 2005 3:46PM

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NO. 4393 P. 1

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From: Joseph Parisi	Date: September 28, 2005	No. of Pages: (including this page) 28
<b>Comments:</b> In re Patent Application of: Albert Henricus Franciscus deHeer et al. Application Serial No.: 09/625,745 Filed: July 26, 2000 For: METHODS OF CAPTURING CATALOG DATA		
<b>FILED HEREWITH:</b> Transmittal Form Fee Transmittal Form Petition for Extension of Time (2 mo.) Request for Continued Examination (RCE) Amendment Submission with Request for Continued Examination Permission to Charge Fees to Deposit Account (RCE - \$790.00; 2-mo EOT - \$450.00; Claims over 20 - \$1600.00; Excess Ind. Claims - \$400.00)		
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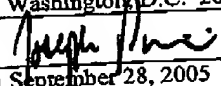
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/625,745
		Filing Date	July 26, 2000
		First Named Inventor	Albert Henricus Franciscus deHeer et al.
		Group Art Unit	2171
		Examiner Name	Sana Al-Hashemmi
Total Number of Pages in This Submission		Attorney Docket Number	002566-56 (16000)
<b>ENCLOSURES (check all that apply)</b>			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (2-mos.) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	
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<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>			
Firm or Individual name	Joseph Parisi, Registration No. 53,435 Nixon Peabody LLP 401 9 <sup>th</sup> Street, N.W. Suite 900 Washington D.C. 20004-2128		
Signature			
Date	September 28, 2005		

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